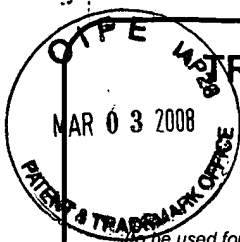


PTO/SB/21 (11-07)  
*AT-17*

Approved for use through 11/30/2007. OMB 0651-0031

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	2	Application Number	10/687,218
		Filing Date	October 15, 2003
		First Named Inventor	Joseph Peter Robert Tosey
		Art Unit	2162
		Examiner Name	Myint, Dennis Y.
		Attorney Docket Number	034300-415

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard
<b>Remarks</b>  		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Thelen Reid Brown Raysman & Steiner LLP		
Signature	<i>[Signature]</i>		
Printed Name	John P. Schaub		
Date	February 28, 2008	Reg. No.	42,125

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**NOTICE OF APPEAL FROM THE EXAMINER TO  
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Docket Number (Optional)  
034300-415

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Signature

Typed or printed  
name

Karen A. Rogers

In re Application of

Joseph Peter Robert Tosey

Application Number

10/687,218

Filed

October 15, 2003

For Incremental Search of Keyword Strings

Art Unit  
2162

Examiner  
Myint, Dennis Y.

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))

\$ 510.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced  
by half, and the resulting fee is:

\$ \_\_\_\_\_

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.  
I have enclosed a duplicate copy of this sheet.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment  
to Deposit Account No. 50-1698. I have enclosed a duplicate copy of this sheet.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

**WARNING: Information on this form may become public. Credit card information should not be included on this  
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I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest.

See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.  
(Form PTO/SB/96)

☒ attorney or agent of record.

Registration number 42,125.

☐ attorney or agent acting under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. \_\_\_\_\_

Signature

John P. Schaub

Typed or printed name

408.292.5800

Telephone number

February 28, 2008

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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